## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Box ISSUE FEE

Commissioner for Patents Washington, D.C. 20231 (703)746-4000

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DURKENT CORRESPONDENCE ADDRESS (Note: Legisty mark-up with any

04/22/2003

FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below. At DEPREY

DIANA (Date 2003

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
.09/513,129	02/25/2000	Keisuke Yemamoto	35.C14299	6645

TITLE OF INVENTION: ELECTRON-EMITTING DEVICE, ELECTRON SOURCE USING THE SAME, AND IMAGE FORMING APPARATUS USING THE

APPLN. TYPE	SMALL ENTITY	issue fee	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1300	\$0	\$1300	07/22/2003	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
VO, TUY	ET THE	2B21	315-169300			
1. Change of correspondence address or indication of "Fee Address" (\$7. CFR: 363).  Change of correspondence address (CfChange of Correspondence Address form PTO/SB/122) attached.  C "Fee Address" indication (or "Fee Address" Indication form PTO/SB/4? Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent fro the names of up to 3 registered or agents OR, alternatively, (2)	patent attorneys the name of a	ATRICK, CELLA	
			single firm (baving as a memi attorney or agent) and the nar		2 HARDER & SCINTO	
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously summitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNER

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CANON KABUSHIKI KAISHA

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent) individual XI corporation or other private group entity Q government

4a. The following fee(s) are exclosed:

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(Authorized Signature) D 129, 296 (Date)	07/28/2003 MARKER2	00
July 22, 2003	A1 57:1501	

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